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APPLICATION NUMBER

F!LING/RECEIPT DATE

FIRST NAMED APPLICANT

ATTORNEY DOCKET NUMBER

10/099,880

03/14/2002

Marc E. Weksler

2650/1H399US1

**CONFIRMATION NO. 5400** 

DARBY & DARBY P.C. 805 Third Avenue

Docketed on 4/18/02 Bul

\*OC000000007812144\*

FORMALITIES LETTER

New York, NY 10022

Docketed without file

799 Attorney\_

Date Mailed: 04/08/2002

# NOTICE TO FILE MISSING PARTS OF NONPROVISIONAL APPLICATION

#### FILED UNDER 37 CFR 1.53(b)

#### Filing Date Granted

An application number and filing date have been accorded to this application. The item(s) indicated below, however, are missing. Applicant is given TWO MONTHS from the date of this Notice within which to file all required items and pay any fees required below to avoid abandonment. Extensions of time may be obtained by filing a petition accompanied by the extension fee under the provisions of 37 CFR 1.136(a).

- · The statutory basic filing fee is missing. Applicant must submit \$ 370 to complete the basic filing fee for a small entity.
- Total additional claim fee(s) for this application is \$216.
  - \$90 for 10 total claims over 20.
  - \$126 for 3 independent claims over 3.
- The oath or declaration is unsigned.
- To avoid abandonment, a late filing fee or oath or declaration surcharge as set forth in 37 CFR 1.16(I) of \$65 for a small entity in compliance with 37 CFR 1:27, must be submitted with the missing items identified in this letter.
- The balance due by applicant is \$ 651.

A copy of this notice MUST be returned with the reply.

Customer Service Center

Initial Patent Examination Division (703) 308-1202

PART 1 - ATTORNEY/APPLICANT COPY

35/06/2002 MBERHE

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370.00 OP 65.00 OP 90.00 OP 126.00 OP

FC:205 13 FC:203 02-03-

EXPRESS MAIL CERTIFICATE

APR 3 0 2002

TD MP#

I hereby certify that, on the date indicated above, this paper or fee was deposited with the U.S. Postal Service & that it was addressed for delivery to the Assistant Commissioner for Patents, Washington, DC 20231 by "Express Mail Post Office to Addressee" service.

PLEASE CHARGE ANY DEFICIENCY UP TO \$300.00 OR CREDIT ANY EXCESS IN THE FEES DUE WITH THIS DOCUMENT TO OUR DEPOSIT ACCOUNT NO. 04-0100

B.W.LEE

Name (Print)

B.w. Lee Signature

Customer No.:

PATENT TRADEMARK OFFICE

Docket No.: 2650/1H399US1

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:

Marc E. Weksler;

Paul Szabo

Serial No.:

10/099,880

Art Unit:

Confirmation No.: 5400

Filed:

March 14, 2002

Examiner:

For:

ANTI-AMYLOID PEPTIDE ANTIBODY BASED DIAGNOSIS AND

TREATMENT OF A NEUROLOGICAL DISEASE OR DISORDER

Box PATENT APPLICATION
Assistant Commissioner for Patents
Washington, DC 20231

Sir:

### **COMPLETION OF PATENT APPLICATION**

The following items are submitted herewith in completion of the above-identified patent application:

- 1. Declaration and power of attorney
- 2. Payment in the amount of \$ 691, (\$ 586 filing; \$ 40 recording; \$65 late) in the form of:

[X] check

[] deposit account no. 04-0100

[] credit card (see attached form)

(See attached Fee Computation Sheet)

- -3.---[]--- Drawings, sheets (Figs.) -
- 4. [X] Assignment for recording to: Cornell Research Foundation, Inc.
- [X] Applicant claims small entity status.
   PARTIAL REFUND of all fees paid within last 2 months is REQUESTED.
- 6. A copy of Notice to File Missing Parts of Application.

Priority is claimed for this application, corresponding application/s having been filed as follows:

Country:

U.S.

Number:

60/276,659

Date:

March 16, 2001

The priority documents

[] are enclosed

[] will follow.

[X] were filed in a previous application.

The Patent Office is authorized to charge any deficiency up to \$300.00 in the above fees, and to credit any excess, to our Deposit Account No. 4-0100.

Respectfully submitted,

Dated: April 30, 2002 \_ \_ \_ \_

Paul F. Fehlner, Ph.D. Reg. No. 35,135

Attorney for Applicant(s)

DARBY & DARBY P.C. Post Office Box 5257 New York, NY 10150-5257 212-527-7700

Docket No.: 2650/1H399US1

# PATENT FEE COMPUTATION SHEET

	No. of Claims Presented	Extra Claims Previously Paid For	Number of Extra Claims	Rate
Basic Fee				\$740.00
Total Claims	30 - 20	- 0 = 10	x \$18.00	\$180.00
Independent Claims	6 - 3	- 0 = 3	x \$84.00	\$252.00
Multiple Depen	dent Claims	- if so, add	\$280.00	\$0.00
2	late submission c	<del></del>		\$130.00
SUBTOTAL				\$1302.00
[X] Small Entity REDUCTION (Half of Subtotal)				
Fee for record	ation of assignme	ent (\$40.00) .		\$40.00
Charge for fil	ing non-English l	anguage applicat	cion (\$130.00)	\$0.00
TOTAL				\$691.00